



THE OFFICIAL MAGAZINE FOR  
AUCKLAND DISTRICT HEALTH BOARD  
March 2013

TE WHEITUMARAMA

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# CEO Column

## Staying connected



Ailsa Claire  
Chief Executive

Welcome to the March edition on Nova.

I have said several times how overwhelmingly impressed I have been by the vast majority of staff who are determined to do the right thing for patients here at Auckland DHB. I have been delighted to see some of these being recognised by their colleagues as a Local Hero, which I launched last month. Later this month, our March local hero will be selected and we'll tell you all about that in the next edition of Nova.

Are we serving our population well? Are we providing patient centred healthcare? Do we truly know what our patients want from us? These are just some of the questions I would like to pose to you at 'Staying Connected', the new CEO briefings, in March. This is my opportunity to share some of my thinking and let you know how we are going, but, more importantly, open up ongoing conversations to help shape our future together.

I hope as many of you as possible can make it and I look forward to meeting you there. You can find out the dates and times on page 4.

As I am getting to know our organisation better and the New Zealand health system, one thing I think we do need to focus more energy on empowering our patients to take more control over their own health and well being.

The good news is there has been a great deal of support for this. However, this will be no easy task and will require a radical change, not only for us but also our patients and other health providers

I am very keen to involve you, other health providers and our community in a conversation about this. To start us off, I have put together a Self Directed Care proposal which attempts to describe the key tasks we will need to do to start tackling this.

I am interested in your thoughts on this and encourage you to take the time to read the Self Directed Care proposal. You can find it on our 'creating conversations' health forum (linked from the home page of the intranet), where you can also post your views or ask questions.



# Patients' applause



Every year, we receive many compliments from the people whose lives we touch. We can't publish them all but here are just some of the things people say about our team here at Auckland DHB.

I am writing to thank the Children's Emergency Department team at Starship Hospital for their wonderful service this morning. My 18 month old daughter was referred to the Emergency Department by her GP and I was blown away with the wonderful staff and service. Thankfully my daughter has since been discharged and is doing really well.

Parent of a Starship patient

Please pass on my thanks to the doctor and nurse who were on duty. Their caring approach and expertise were outstanding. I feel very lucky to have this sort of resource to hand if I should ever need it again.

Parent of Starship patient

The nurse (Anu) on ward 24B was very friendly and welcoming to me, my daughter and my son. She took time to show us to our designated room and where the visitor's kitchen was should we need refreshments. She is in the right industry, I can only imagine the children love her here, as she has a soft natured personality. I believe she deserves a good pat on the back!

I recently needed the services of the Early Pregnancy Assessment Unit and wish to thank Ann and Judy for the care they gave me. Although services were naturally limited due to the Christmas break, they both gave me detailed and supportive information over the phone and in person when I attended for an appointment on my return from holiday. It was a difficult time for my husband and I and we would have been lost without the services provided by the unit. It is an excellent service and we are very grateful it was available.

Women's health outpatient

# Aro Arataki Children's Centre celebrates 30 years

The Children's Centre in Greenlane Clinical Centre is celebrating three decades of providing childcare in the community. Established in 1983 as the Greenlane and National Women's Hospitals Crèche Inc, the facility was initially designed to provide childcare to the children of Auckland DHB staff. A few years later, the Centre gained prominence in the community and began offering out of school programmes for the children of Cornwall Park Primary School.

Fast forward 26 years and the centre was renamed Aro Arataki Children's Centre, which is Te Reo for 'the way forward'. It is a fitting name for a group of educators that continually strives to evolve themselves for the benefit of their children and families.

Today, Aro Arataki has 25 staff and is licensed to care for 75 children daily plus school children. Due to its popularity with parents in the community, Aro Arataki currently has a waiting list of children.

Students and staff from Aro Arataki Children's Centre celebrates 25 years of child care in Greenlane.



## Did you know?

- 122** thousand loaves of bread are bought each year for patient meals.
- 1.7** million paracetamol tablets are supplied to our inpatients every year by the Pharmacy Dept at Auckland DHB.
- 10** the height in metres of the tallest easter egg ever made.
- 12** the number of years since the last Gay Pride Parade was held in Auckland before this year.
- 500** the number of rescues the Westpac Helicopter performs each year.
- 65** per cent of the population of Auckland had access to the internet in 2006 (source 2006 census).  
*Don't forget census day this year on 5 March.*

### Don't let the flu get you

The seasonal flu vaccine will be available free of charge for all Auckland DHB staff from 8 April 2013. The usual flu vaccine sessions will be held at Auckland and at Greenlane or you can get the vaccine from your in-team vaccinator if you have one on your ward. Watch out for posters and more details in next month's Nova Magazine.

*Protect yourself, your family your colleagues and your patients by getting the flu jab early this year.*



### 2013 New Zealand Census

The New Zealand Census takes place on Tuesday 5 March 2013.

Everyone in New Zealand on that day needs to fill in a census form. Auckland DHB is required to make sure that a census form is completed by all patients in our hospitals on the night of Tuesday 5 March 2013.

Census forms are being distributed to all overnight wards and emergency departments on 4 March and completed forms will be collected from wards and emergency departments on 6 March. Wards are also requested to print a copy of the patient whiteboard at midnight on 5 March so the Census team can reconcile this against the forms completed.

Nursing staff are asked to support patients who are unable to complete their Census forms where there are no family members available to do this.

For more information go to the front page of the intranet.

### Pasifika Week

The Pacific Health Team will be celebrating Pasifika Week 4- 8 March.

Teams across Auckland DHB are being invited to decorate their wards and clinics to celebrate the week. Another event to watch out for is a Talanoa (panel discussion) about best practice for engaging with Pasifika families. This will take place on Tuesday 5 March 10.30am – 12.30pm at Ernest and Marion Davis Library.

# Welcome to our recent starters

Nicholas Allfrey, Jeanette Asi, Catherine Baird, John Banerji, Mahima Bansal, Andrew Barr, Alicia Berghan, Sharion Brewerton, Paul Browne, Joanne Burton, Marc Andrew Capistrano, Orla Carley, Tanya Carter, Patricia Casey, Amanda Casserly, Claire Chaffey, Heidi Chambers, Min Cheng, Jennifer Clark, Arapera Clarke, David Cleveland, Glenda Cowie, Alanieta Daunakamakama, Rebecca Davidson, Stephanie Davies, Mary Davis, Hannah De Rijk, Diana Denhaan, Kath Dix, Liesje Donkin, Genevieve Donohue, Phaedra Donovan-Farrow, Una Doran, John Dorey, George Drew, Krissie Drew, Martin Du Plooy, Carly Edwards, Jacqueline Elvin, Renee England, Ma. Noli Espinosa, Hamish Esslemont-Clow, Christine Finn, Te Rangi Fisher-Marama, Claire Fleury, Cynthia Flores, Natalie Flynn, Courtney Forgeng, Sarah Foster, Paula Framhein, Inga Frederikson, Gabrielle Gensale, Lauren Godsiff, Dekrita Govender, Sandra Grant, Henrik Hack, Melanie Hamilton, Nur-Rayhan Hapin, Jane Harris, Linda Harvey-Fitzgerald, Kathleen Hatfield, Cathryn Hooker, Eunsong Im, Jo-Ann Ireland, Carmel Jacobs, Shiny James, Katherine Jepson, Mandy (Iimin) Jiang, Danielle Johnson, Maxwell Johnson, Jacqueline Jollands, Moira Jones, Shannan Kelly, Annah Kerins, Krystal Koloni-Pasis, Marjolyn Lago, Helen Land, Jolene Larsen, Joshua Leasi, Arita Lee, Seong Lee, Edward Lescher, Wynn Leung, Jing Li, Lily Li, Sina Li, Xian Li, Rommel Llenes, Britany Lloyd, Susannah Logan, Brenton Love, Sonia Luan, Rosemary Mackay, Shenja Mahler, Te Rawharangi Mangu, Eduard Marais, Samantha Mason, Emma Mccosh, Paul Mcguire, Lynette Mellor, Velita Menezes, Nicole Menzies, Amy-Jean Mephram, Joseph Monkhouse, Celia Moore, Vivienne Muffty, Min Nah, Helen Ng, James Nuttall, Logan O'hara, Anna Ortiz, Faimafili Palatoni, Pritam Patel, Katherine Perry, Stephanie Phua, Ruth Porteous, Ashlee Pricor, Eve Pullar, Haidi Qiu, Melany Rhodes, Christine Rivera, Carol Robertson, Paula Robertson, Dail Robinson, Marion Roosenbrand, Thirusha Rungan, Fran Sawtell, Tessa Schriek, Emma Scott, Chitra Shenoy, Aida Siegers, Nitika Singh, Jean Sithole, Kenneth Smith, John Paul So, Carol Stone, Vincent Su'a, Ernie Sunlay, Melissa Taitimu, Eapeisi Taito, Nicola Thomas, Kirsty Thompson, Michelle Thorpe, Sanduni Thuduhenege, Teena Timu, Diana Tormey, Mariela Valle, Erin Van Bysterveldt, Gemma Veale, Samantha Wallace, Awhina Walters, Cara Weightman, Lynette Welch, Tamsin West, Tania Whare, Anita Whitta, Miriam Whitton, Paula Whyte, Phillipa Williams, Kerina Wilson, Xiaohong Yuan, Yvette Zhang, Xiaojiao Zhao, Yuan Zhou, Tienneke Ziegler, Sipelire Zuze.

*Tell us what you think  
of this new feature.*

## An unexpected arrival at the wharf

It's six o'clock in the morning, you're in the ferry getting ready to go to work when someone tells you that you need to deliver a baby in 30 minutes. What will you do? Fortunately for everyone, Auckland DHB midwife, Juniper Tengblad, knew exactly what to do.



The day seemed like it was going to be ordinary for Juniper. But before the ferry she was on, set sail to Auckland City, a nurse approached her and asked to help Waiheke Island resident Rachel Demchy deliver a baby. "At first, I thought that Rachel was on the ferry and I would support her on the 35-minute journey to the city. But she was actually in the first aid room of the ferry terminal and, as I walked into the room, it was very clear that she was going to have the baby in the next 30 minutes," Juniper recounted.

Accompanied by a nurse and ambulance officer, the three were determined to help the mother get through her exciting journey, even if they had no equipment other than some gloves, a towel and an oxygen cylinder with a mask too big for a newborn baby. "I just completely zoned out and did what needed to be done. I was very relieved when she said she was on term because delivering a pre-term baby in these conditions would have been another story."

At 6.25am, baby Joshua was born. He initially needed some oxygen but recovered quickly. A back up midwife arrived at 6.35am and took over the care, which allowed Juniper to catch the next boat to get to work. "I was late but I had a good excuse."

Juniper, who has been a midwife for two years, believes that her experience was a good test in her practice. It showed her that she can adapt and stay calm in difficult situations. "You can do all the training in the world, but it's living these kinds of experiences that make you more confident."

Juniper admits that being a midwife can be very challenging. But the great stories, continuous learning and rewarding experiences make every moment worthwhile.

## Are we serving our population well?

Do we truly know what our patients want from us? Are we serving our population well? These are just some of the questions up for discussion at 'Staying Connected'.

Staying Connected is the new style CEO briefings and will be your opportunity to hear from Ailsa, our CEO, about how the organisation is going and open up ongoing conversations to help shape our future together.

These sessions are open to everyone in the Auckland DHB team, so put one of the dates in your diary and make sure you stay connected!

DATE	TIME	VENUE
Monday 11 March	11.30am - 12.30pm	Auditorium, CEC, Level 5, Auckland City Hospital
Thursday 14 March	1 - 2pm	Liggins Theatre, Bldg 16, Greenlane Clinical Centre
Wednesday 20 March	8 - 9.am	Liggins Theatre, Bldg 16, Greenlane Clinical Centre
Friday 22 March	7.30 - 8.30am	Auditorium, CEC, Level 5, Auckland City Hospital



(Left to right) Jonathan Embleton, Michael Sethna and Darren Bot started a fitness group for their clients at Manaaki House 12 months ago.

# Sound mind, sound body

There are many reasons we exercise and it's not always about getting a better body. At the Manaaki House Community Mental Health Service, they understand that exercise helps improve the mind. So when an occupational therapist, registered nurse and community health worker from Manaaki House got together a year ago to create a fitness group for their clients, the inspiring changes they've seen reaffirmed that they are on the right path.

"Our clients have become more motivated, sociable and confident before our very eyes," said Jonathan Embleton, one of the founders of the fitness group and occupational therapist at Manaaki House. "They tell us they are eating better and cutting down on drug, alcohol and tobacco use. One client lost around 16kg!"

Jonathan, along with Michael Sethna, registered nurse, and Darren Bot, community health worker, run the fitness group and have eight clients in their early 20s to 30s. Their fitness group stands apart because of the 'boot camp' approach they use. "It would be financially

difficult and mentally challenging for our clients to participate in commercial gyms," said Jonathan. "But the activities we've created give them the stimulation they need and support from specialists like us."

They take in new members carefully and are mindful about medications, mental state, perceived and current risk in every session. Sometimes, they need to manage the attendance of clients or provide one-on-one support.

The boot camp involves circuit training, floor exercises and stretches. This year, the fitness group will mentor two to three clients more closely and provide simple exercises that they can do in-between sessions. They are also looking into referring their clients to a dietitian.

"We really want to continue this life-changing initiative. The workouts have helped them realise that they can manage their health and their lives. Some have mustered enough strength to take on part-time jobs and we have seen the positive ripple effect this has on other participants."

The fitness group has truly captured the balance of approaches for mental and physical health, demonstrated a good multi-disciplinary approach and excellent community integration. They are a great example of staff working to lift the health of Aucklanders.

Gus Ngapera (right) from Faith Church Mixed Martial Arts, Panmure, is an essential component of the fitness group's success. He offers his equipment and skills to the fitness group's clients for free.



# Auckland DHB on wheels

For the month of March, a total of 30 free bikes will be loaned to some eager Auckland DHB staff who want to have a go at sustainable travelling.

Auckland DHB, in partnership with Auckland Transport, has organised this month's biking activity.

If you normally bring in a car or take public transportation to work and want the flexibility cycling can offer, this is a great opportunity!

Register now by visiting Travel Ezy on the Intranet. You can choose to either get a guided ride session with a safe cycling orientation or a free bike for one month or both! If you're based at Auckland City Hospital, the cycling session will be on 5 March, 12-1pm and 1-2pm in the plaza area outside Columbus



Cafe on Park Road. For those at Greenlane Clinical Centre, the session will be on 6 March, 12-1pm and 1-2pm by the chimney near the Cricket Club.

The free bike project is a great opportunity to help ease the stress on both Auckland City Hospital and Greenlane Clinical Centre car parks, as well as the immediate road network. With around 10,000 working for Auckland DHB, imagine the difference we can make if we all travelled sustainably! Remember, only a limited number of bikes are up for grabs, so register now!

# A+ Scholars

Congratulations to A+ Trust Scholars Erike Ng and Alyssa Marshall for completing their nursing degrees at the end of 2012. Erike is now a theatre nurse at Level 9 and Alyssa is working in cardiovascular intensive care unit. The young A+ Trust scholars

were among the few who get picked as early as high school for their demonstrated passion in healthcare and potential employment with Auckland DHB. The scholarship funds three years of student fees while at university.



But for Erike Ng, the scholarship was more than just about getting financial support. "A+ Trust was like a mentoring programme because they helped me find opportunities that led me closer to achieving my main goal – to be a nurse. For example, I found part-time employment at the Clinical Education Centre where clinical courses are taught. Because of my links, I got to sit in at courses like CPR and tracheostomy. And this was before I started my nursing course at the University of Auckland!"

The two young women exude eagerness and genuine care for people who need help, and are indeed a great addition to our nursing team.

(Left to right) A+ Trust Scholars Erike Ng and Alyssa Marshall.



# SEXUAL HEALTH AND THE CITY

Our Sexual Health Education and Clinical Teams were out in full force in last month's Big Gay Out at Coyle Park. They ran a health promotion stall and offered free community testing for Sexually Transmitted Infections (STI).

The team handed out 138 self-testing kits on the day to help raise awareness of good sexual health. It's not your run-of-the-mill freebie but with good humour and unfaltering professionalism, the team was able to start conversations about condoms, choices, STIs and sexual health testing while also offering passers-by the chance to self-test.

The community screenings truly make STI testing easy – males need only to pee in a pot and females are given self-collected swabs. Due to the demographic of the event, throat and anal swabs were also offered. Results are sent by text after 10 days and free treatment and follow-up is given for positive results.

Auckland DHB implemented this model of health promotion and the provision of clinical services in large community meetings in 2005. They can be seen at various events around Auckland, such as university orientations and the Erotica Festival. The Sexual Health Education Team and Clinicians usually 'set-up camp' at events where the demographics appear highly in STI statistics, such as young people who don't access healthcare frequently.

Testing is offered for chlamydia and gonorrhoea, two of the most common bacterial STIs in New Zealand. "We take the service to the people, so there is no need for appointments or travelling to a clinic," said Hayley Pritchard, Community Health Worker.

But how do they handle such a sensitive and private topic at public events? "We are very tactful with our sexual health promotion. When running screening events or handing out condoms, we

*Above: Some of the staff from the Education Unit and Clinical Team (left to right) Jono Selu, Kataraina Davis, Eileen Brown, Andy Wallace, Suzanne Werder, Hayley Pritchard.*

select people of appropriate demographics to approach, especially at family events."

The team capped off Pride Week by taking part in the walking parade on Ponsonby Road. They were joined by students from the Peer Sexuality Support Programme, which is implemented by the Education Unit in 25 secondary schools across Auckland. They were also at last month's Fast Fours and Rotary Nationals and will be at the Unitec 'Sounds in the Sun' orientation concert this month. Their visibility in our communities is one of the ways they aim to normalise sexual health and encourage people to take responsibility of their body, health and decisions about sex.

Hayley and Kataraina handed out self-testing kits and condoms at the 2013 Big Gay Out.



# Better care for patients with dementia



Patients with dementia are now getting better, safer care sooner, thanks to the introduction of the Better Brain Care Pathway.

(Left to right) Belinda Emmerson and her father, Kenneth Emerson with Aimee Slight, staff nurse at Ward 68.

"Patients with dementia or other cognitive impairments who don't get quickly identified when they come into our hospital are at risk of falling and not getting adequate nutrition and hydration", says Maree Todd, geriatrician and one of the Better Brain Care Pathway Project team.

The project Team Dr Maree Todd, Dr Gary Cheung, Dr Richard Worrall, Emma Hill, Richard Benfell, Dr Sarah Preece, Denise Thatcher, Kathryn Reeves, Maxine Stead, Tony O'Connor, Dr Paul Owen.

"Carers and families sometimes complained that their loved ones return home worse than when they came into hospital. Not only was this a risk to individual patients but research carried out in the UK suggested this costs each hospital the equivalent of about \$12million."

The Better Brain Care Pathway was introduced as part of the Concord Programme to help identify patients with dementia. The key elements of the project are:

- early communication with the family or caregiver to find out what the persons usual care needs are with the introduction of "This is me"
- good preventive care ensuring good nutrition and fluid, keeping the person mobile and independent, and prevent falls
- improved diagnosis
- better discharge planning

Better Brain Care Pathway has been piloted in Assessment and Planning Unit and on Ward 68.

Although the programme is still in pilot phase it has received positive feedback from the nurses involved who now feel empowered to carry out cognitive screening.

The approach used for 'This is me' is about to become a core component of our care for other patients through the introduction of the Health Passport, see page 12 to find out more.

Jeanette, whose husband suffered from dementia used a booklet similar to This is me and the Health Passport, she says, "I can't recommend using a booklet like this enough. When my father went into hospital or day-care, it was the first thing packed in his bag", she said. Before we had the booklet he wouldn't always be prompted to eat, he looked so well and as new staff came on shift, they wouldn't always realise what assistance he needed. Having the booklet meant the support he needed was all there in one place for everyone to see. The booklet was also useful for me as it contained all the contact numbers I needed in one place."

This is a great example of Concord and the clinicians working together to make sure every dollar is used wisely but more importantly, increasing patient safety and quality care.

## CONCORD corner

We all know of examples where we do things, perhaps routinely, that do not add value for our patients. But stopping current practice is not always easy. Finding the time to review evidence, obtaining consensus, documenting guidelines, training etc, can all stop us from doing the right thing for our patients and the healthcare system.

But Concord can help you... so tell us about these examples on the Concord website (use the link on the Intranet homepage), email [concord@adhb.govt.nz](mailto:concord@adhb.govt.nz) or tweet @ConcordADHB. Let's work together to make a difference.

Thank you Andrew Meisner, Leanne Wilson and Gillian Martin for submitting their ideas in January.

### Idea submitted last month:

"I noticed something that I thought was pretty wasteful - a bin full of batteries. When I queried, they were used from the pumps they now use ... 4 AA batteries and last only 8 hours! Seems like a great place for rechargeable batteries as apparently, these new pumps are used throughout the ADHB."





# Daily ward meetings are a hit!

Better decision making and greater involvement in solutions are just some of the benefits realised since the Management Operating System was introduced in Respiratory Services.

Two of the key elements of the Management Operating System are creating visibility of the team's issues, priorities and actions; and holding regular meetings for everyone in the multi-disciplinary team to discuss these.



One area where Management Operating System has been particularly successful is on the Wards. Charge Nurse, Sarah Wilson, is finding the daily meetings on her ward a huge help in improving patient care and communication. "The benefit for us is that the team is coming up with the issues, these are their risks, issues and solutions. The meetings have helped with communication and are an opportunity to reinforce the important priorities. The decisions we make and the action we take are displayed all the time, so even the people who don't attend the meetings can see what needs to be done."

The Management Operating System brings greater visibility, transparency and shared ownership for the organisation priorities. As the rollout continues, the aim is that, wherever you go in the



Top: Daily ward meeting in action on Ward 72 .

Inset: One of the team adding an issue to the improvement board.

organisation, you should be able to understand how that team is doing today, what their plans are for the future and how these fit with Auckland DHB priorities.

Want to find out more about the Management Operating System? Check out the video on the Healthcare Excellence Intranet pages.

# App, app and away!

The Haemophilia Centre has found a way to connect quickly with their patients through the very first clinical phone app created for Auckland DHB.

The TRACKER FACTORY has been designed to allow haemophilic patients to conveniently track their bleeds and infusion treatments. Haemophilia is a rare disorder where a person's blood does not clot properly because it is missing an essential clotting factor. This means haemophiliacs bleed longer when they get a cut or if they bleed internally.

"The way we treat haemophilia has come a long way since the 1970's. Back then, patients had to go to hospitals for infusions but now, patients can self-infuse at home," said Mary Brassler, Clinical Nurse Specialist who helped develop the TRACKER FACTORY.

Mary Brassler, Clinical Nurse Specialist from the Haemophilia Centre, helped develop the first clinical app for Auckland DHB to help haemophilic patients.



"Hospitals also used to record every haemophilic patient's bleed and transfusions. This responsibility was transferred to patients since home infusions were introduced. However, this approach created challenges in tracking our patients' progress."

Mary recounts that patients have been recording their bleeds and self-infusions in a myriad of ways. Others take time to send in an elaborate spreadsheet detailing all the information needed, while one had provided hastily written notes on a serviette! Because there is no cure for haemophilia, ongoing treatment and monitoring is needed. This is where TRACKER FACTORY comes in.

"We thought the best way to ensure patient buy-in of a new recording system is to make the tracking of their bleeds and infusions easy, wherever they are. Almost everyone has a phone or access to a computer, so it makes sense to use this technology. The data is then sent to the Haemophilia Centre so we can analyse patterns, trends and commence rehabilitation to help improve the care we provide to our patients."

The Haemophilia centre has 60 patients ranging from mild to severe haemophilia and 20 patients are currently trialing TRACKER FACTORY. The app is free to download and use, and at this stage, can be downloaded on iPhones, tablets and computers.

It is envisioned that the TRACKER FACTORY app can be transferred to other clinical services in the future. It is an exciting step towards caring for our patients and finding solutions that are up with the times and in sync with our patients' lifestyles.



# Minister's Letter of Expectations for 2013/14

## – What does it mean for us?



Dr Lester Levy, Board Chair

I received our 2013/14 letter of expectations from the Minister of Health in late January. These expectations are key to our Annual Plan, which itself is critical to the Crown Funding Agreement, which confirms our District Health Board revenue.

The themes are very consistent - a requirement for further improvement within constrained funding increases. Whilst the Government continues to invest more in the public health system, this year's increase is less than last year's, which poses a number of challenges for our organisation.

Moving forward, our Board has a clear expectation that every service must stick to its budget as it delivers the required services (in particular, at the appropriate level of safety and quality). We cannot continue with a situation that parts of the DHB overspend and are effectively 'bailed out' by those that don't (in particular, the funder part of our DHB is consistently 'bailing out' the hospital part).

This will need a much higher level of planning and the Board is expecting more detailed and defensible plans from services. These will be placed under a very high level of scrutiny by the Board's Audit and Finance Committee. We will also need more thoughtful and rigorous prioritisation of capital expenditure (due to a lack of external capital).

As well as this overriding message, the letter of expectations has several key themes:

- National Health Targets – clear and specific plans for the achievement of all National Health Targets.
- Care Closer to Home – improved continuity of care through integration (between services within hospital, between hospital and community services (includes NGOs), between hospital and primary care, between hospitals, between district health boards, between health sector and other sectors and between ADHB and St John's Ambulance).
- Health of Older People – more integrated services for older people to support continued, safe independent living at home as well as avoiding unnecessary hospital admissions, we also need to improve homecare, stroke and dementia care.
- Regional and National Collaboration - continued acceleration and progress on our regional and national collaborations.
- Whole of Government Key Result Areas – our responsibilities in this regard include infant immunisation and a reduction in the incidence of rheumatic fever. We will also be involved in reducing the number of assaults on children and the implementation of the White Paper on Vulnerable Children.

I believe we have the capability to respond to what is required of us - our world continues to change and we all need to face that reality. We cannot meet the new challenges that this turbulent world has thrown at us by continuing to do things as we have.

Thank you all for the efforts I know you will make to ensure we meet these new expectations.

# Building the Māori/Pacific male nursing workforce

The 2012/13 Rangatahi cohort have just finished their placements at Auckland DHB. The Rangatahi programme provides:

- an introduction to working in a hospital for Māori and Pacific males
- an insight into what the health workplace looks like
- a 7-hour Introductory Day at Auckland City Hospital
- a workplace experience week at Auckland City Hospital
- a cadet programme
- support and mentoring in Year 12 and 13, right through to graduation from tertiary study and into the health workplace.

Arran Matia, one of the students said, "the programme has a great whānau-based support system and is an important experience for any young Māori or Pacific students wishing to follow a career path in health. His time in the Renal Unit crystallised an ambition to be a renal technician and he has now applied to AUT to do applied health science.

Other members of this group spent time working in the Cardiovascular Intensive Care Unit and Te Whetu Tawera. The group were congratulated at the end of their placements by our Chair Dr Lester Levy.

Associate Director of Nursing Lorraine Hetaraka-Stevens says, "the scheme has produced nine successful Rangatahi placements. Several have moved through into nursing. We're delighted this year has seen the largest number of Māori and Pacific new graduate nurses entering the organisation, with 17 recruited in the January 2013 intake.

"I acknowledge the support for the Rangatahi Programme that the Board, management and dedicated clinical staff have supplied and, most of all salute the Rangatahi for their vision, energy and commitment," Lorraine says.

## Whāia te iti kahurangi ki te tuahu koe me he maunga teitei.

*Aim for the highest cloud so that if you miss it, you will hit a lofty mountain.*

Arran (4th from right) with (l-r) Jade Atkinson-Noda (Rangatahi), Dawson Ward (Intensive Care Unit Technician, CVICU), Ceumas Kennedy (Rangatahi), Chair Dr Lester Levy, Arran, Fredric Doss (Haemodialysis Educator), Suzanne Joynt (Charge Nurse, Incentre Haemodialysis Unit) and Ollie Hattaway-Ledoux (Rangatahi).



# Have you told us about your local hero yet?

Last month, we launched **local heroes** an opportunity for you and our patients to nominate members of the Auckland DHB Team who go above and beyond to provide the best possible care for our patients or an outstanding service to a colleague.

The nominations have been flooding in and, later this month, we will select one of our **local heroes** for a special award. Look out in next month's Nova for details.

Keep the nominations coming in!

## local heroes



You can nominate on line at [www.adhb.govt.nz/localheroes](http://www.adhb.govt.nz/localheroes) or fill out one of the postcards available on wards and receptions. You can scan this QR code with your smartphone to go direct to the online nomination form.

### More about QR codes

QR or Quick Response codes allow you to easily access information on the web or a phone number from your smartphone without the need to key in the details.

To use this feature, you need an app on your phone to scan the code. There are a number of different ones available through iPhone and Android app stores.

## Celebrating 50 years in health

Glenys Edwards, theatre nurse, recently celebrated a 50 year career in health. She marked this magnificent milestone over morning tea with colleagues.

Glenys began her training at Greenlane back in 1963 where she remembers having three wonderful years of hard work, camaraderie and fun. "I was lucky to train at Greenlane, where I cut my teeth on intensive care, and witnessed early bypass surgery on adults and children. I also worked at National Women's Hospital when the world's first intrauterine transfusion was done by William Liley and work was being done to accelerate maturity of neonatal lungs to decrease morbidity in pre-term babies. Those were exciting times," says Glenys.

"I have worked with some amazing people – great, dedicated teams, delivering hope and expert care to so many grateful patients. It has been a privilege – a way of life ... so many changes and challenges... so many wonderful people and it's not over yet!"

Colleagues in theatres say we are lucky to have Glenys as she is such a thoughtful and caring person".

Congratulations, Glenys, on such a fabulous achievement!



# Health Passport

A new booklet to improve the hospital experience for patients with communication difficulties is being introduced at Auckland DHB this month.

The Health Passport is a booklet for patients to complete themselves with help from those who know them best. Patients who will benefit most from completing a Health Passport are those who have difficulty communicating, people who suffer from cognitive impairments, and those who visit hospital frequently.

Each time the patient attends a hospital or clinic appointment, the Health Passport provides consistent information for health workers to help make sure patients are cared for appropriately and safely. It includes things like the help they need to move around, what might make them anxious, how best to communicate with them.

Please promote the Health Passport to those who come into your care and, if a patient comes in with a completed Health Passport please discuss this with them and use the information to provide a better health experience for our patients.

To find out more, check out the Health Passport page on the Intranet.



## Win a Samsung Galaxy Tablet



To celebrate the opening of their Auckland City Hospital branch, ASB is offering Nova readers the chance to win a Samsung Galaxy Tablet.

To enter, send your answer to this month's question (below), along with the answer to last month's question to [adhbcommunications@adhb.govt.nz](mailto:adhbcommunications@adhb.govt.nz) Please put ASB competition in the subject line and make sure your answers reach us by 12 March 2013.

### Question:

What is the fax number of the ASB Auckland City Hospital branch?

ASB has opened a new branch on Park Road to make banking easier for everyone in and around Auckland City Hospital. Visit the branch to find out the benefits on offer for the Auckland DHB team.

## Orbit Welcome to the travel remedy

### Monthly Competition



★ Congratulations to Christine Mills, anaesthetic technician, winner of the December/January travel remedy competition.

The winner of this month's travel competition will receive one night's accommodation at the Grand Mercure Puka Park Resort.

Grand Mercure Puka Park Resort is a secluded hideaway, situated at Pauanui Beach, on the east coast of the Coromandel Peninsula. The property comprises of 42 chalets, which feel like your very own private tree house, with the ensuite bathroom and private balcony nestled on the side of the majestic Mt Pauanui.

### Question:

**Which patients have been using the very first smart phone app developed for Auckland DHB?**

To enter, send your answer to [novan@adhb.govt.nz](mailto:novan@adhb.govt.nz) with 'travel competition' in the subject line. Or mail to Communications Team, level 2, Bldg 16, Greenlane. Entries must be received by 31 March. *Only one entry per person, please.*